

Statement in Support of SB1076 – AAC Aid in Dying

Death is never an easy subject. Medical aid in dying for the terminally ill is a particularly difficult subject. It raises ethical, religious, and existential questions. But aid in dying is ultimately about agency. Terminally ill patients who are suffering should have agency over how they die.

To quote [Compassion and Choices](#), “Medical aid in dying allows terminally ill adults to get a prescription they can take to end their life peacefully.” The words “terminally ill” and “can” are critical to understanding aid in dying laws. In most jurisdictions, medical aid in dying is restricted to the terminally ill and anyone considering aid in dying must be evaluated and approved (usually by at least two doctors) - it’s not a spur of the moment decision or quick process. Once approved, agency rests with the individual. Important to note, as reported by [Death with Dignity](#), few with a terminal illness avail themselves of medical aid in dying, and of these about 30% of patients who receive aid in dying medications never take the drugs. Simply knowing the option is available appears to ease their pain.

Nine U.S. states and a growing number of countries currently authorize medical aid in dying. A recent [survey](#) of Connecticut voters showed that more than three fourths (including almost 70% of Roman Catholics) said medical aid in dying should be legalized. I strongly urge the Joint Committee Public Health Committee to advance SB1076 – AAC Aid in Dying for Terminally Ill Patients. Residents of Connecticut should have the freedom to choose.

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